

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	CA		10-11-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	MTN	JD	10-20-01
FORMALITY REVIEW	CH	744	11-14-01
RESPONSE FORMALITY REVIEW	CK	1109	4-02-02

INDEX OF CLAIMS

BEST AVAILABLE COPY

Rejected N ..... Non-elected  
 Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	11/5/24/8
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If more than 150 claims or 10 actions  
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574  
11/14